

**UTAH HUMANITIES COUNCIL
UTAH DIVISION OF STATE HISTORY**

ORAL HISTORY GRANT APPLICATION COVER SHEET

Leave all shaded spaces blank. Please type or print clearly.

Project Title	Grant Number
Application Date	Contract Period
Applying Organization	Project Director
Organization Name	Name
Organization Type	Address
U.S. Congressional District #	City / State / ZIP
Utah Legislative Districts (House and Senate)	Telephone / FAX
Address	Email Address
City / State / ZIP	*Signature
Telephone / FAX	Fiscal Agent (may not be same person as Project Director)
Email Address	Name
Web Address	Telephone/FAX
Authorizing Agent	*Signature
*Signature	Grant Writer
<i>* Signatures on this page indicate compliance with all federal statutes listed in the Oral History Grant Guidelines.</i>	Name
Main Goals (state your project goals in one or two sentences)	Telephone/FAX
	Email Address
	Collaborating Organization (optional)
	Name
	Institution Type

BUDGET SUMMARY	Application	Award
UHC/UDSH Grant Funds	(1)	
In-Kind Matching	(2)	
Cash Matching	(3)	
(add lines 2 + 3)		
Total Project Budget	(4)	

PLEASE LEAVE SHADED AREAS BLANK FOR OFFICE USE. THANK YOU.

**UTAH HUMANITIES COUNCIL/ UTAH DIVISION OF STATE HISTORY
ORAL HISTORY GRANTS**

PROPOSAL NARRATIVE

On separate sheet(s) of paper, please write a narrative proposal. Pages must be numbered. The narrative proposal must include the following headings and information:

- Other Grants Supporting This Project
List all other grants that support your proposed project.
- Goals and Expected Results
Please state clearly what is being proposed, why it is to be undertaken, what the expected results and public benefit of the proposed project will be.
- Staff and Volunteers
Briefly summarize, in one or two paragraphs, each person's qualifications for the assigned role, including name, position or title, academic or professional affiliations, educational background, and experience directly related to the project's topic. *Don't forget to include the oral history scholar who will be overseeing the project. Personnel from the Public History section of UDSH may fill this role, but they must be listed in this section along with their qualifications.*
- Plan of Work
Please outline your plan of work, including what steps are planned with specific dates and activities for each step. You must include beginning and completion dates.
- Budget Explanation
Itemize and describe clearly all expenses (including proposed UHC/UDSH funds as well as matching in-kind and cash contributions) for the figures shown on the form below. Applicants must explain how UHC/UDSH funds will be spent within the overall project budget. (Mileage reimbursed @ .40 per mile)

BUDGET FORM

EXPENSES	GRANT REQUEST	IN-KIND MATCH	CASH MATCH	TOTAL EXPENSES
Personnel				
Materials and expenses				
Printing				
Travel and mileage				
Other				
TOTAL COST	(1)	(2)	(3)	(4)